U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

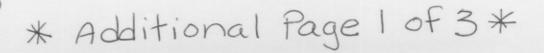
1. File Number U - 2227	2. Fiscal Year Covered From:
tayolgris o	01/01/2004 Through: 12/31/2004
Name and address of person filing.	Name, file number, and address of labor organization.
Name Moira S Pittman	Name Directors Guild of America
	Labor Organization File Number 200-0/8
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 4230 Coloma Ave.	street 7920 Sunset Blvd.
city Woodland Hills	city Los Angeles
State CA ZIP Code +4 9/364-	4834 State CA ZIP Code + 4 90046-331
5. Position in labor organization. Human Resvu	rces Administrator
	ur spouse or minor child directly or indirectly had any of the following interests e exclusions set forth in the instructions):
, , , , , , , , , , , , , , , , , , , ,	an, or derived modifie of careful desirent of
monetary value from an employer whose employees your orga	nization represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any).	nization represents or is actively seeking to represent.
monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any). Name	nization represents or is actively seeking to represent.
monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any).	nization represents or is actively seeking to represent.
monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any). Name	7.a. Nature of Interest, Transaction, or Income.
monetary value from an employer whose employees your organs. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any:	nization represents or is actively seeking to represent.
Monetary value from an employer whose employees your organs. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.
Monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City	7.a. Nature of Interest, Transaction, or Income.
Monetary value from an employer whose employees your organie. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street	7.a. Nature of Interest, Transaction, or Income.
monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. Signature
monetary value from an employer whose employees your organ 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. Signature alty of Perjury and other applicable penalties of the law, that all of the information impanying documents), has been examined by the signatory and is, to the best of the

Name of Person Filling Moira Pittman	12004 File Number U- 2227
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization	vise dealing with the business rely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Geffner + Bush Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite (100) Street 3500 W. Olive City Burbank State CA ZIP Code + 49/505-556	9. Business deals with: a. Labor Organization b. Trust c. Employer
19. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if aqy: P.O. Box, Bldg., Room Na, if any Street City	11.a. Nature of such dealing. Law firm. Outside Counsel. 11.b. Approximate dollar value of such dealing. \$447,762- 12.a. Nature of interest held or income received.
State ZIR Code + 4	Basket of baked goods in (holiday gift) "Mrs Beasley's
	(Ame) area every processor in processor in constitution area every a
C. Reseived from any employer (other than an employer covered under	12.b. Amount. Approx, \$75,00
C. Reseived from any employer (other than an employer covered undor from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	er parts A and B above)
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	er parts A and B above) or other thing of value.
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	er parts A and B above) or other thing of value. 14.a. Nature of payment.

Form LM-30 (2003)

13.b. Is the Business an Employer

State



14.b. Amount of payment.

ZIP Code + 4

or Consultant

Form LM-30 (2003)

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a

ZIP Code + 4

or Consultant

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substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Gourmet Coffee a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer street 7660 Densmoore Ave. ZIP Code + 49/406-2043 11.a. Nature of such dealing. 19. If 9.b. or 9.c. is checked give trust or employer's name. coffee, beverage and paper goods service. Name Trade Name, if agy: P.O. Box, Bldg., Room No. if any Street 11.b. Approximate dollar value of such dealing. \$68,015. City 12.a. Nature of interest held or income received. "Adonation has been State ZNR Code + 4 made in your name ... (holiday gift) amount unspecified to Rancho San Antonio Boys Town. unknown 12.b. Amount. C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any) Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City

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13.b. Is the Business an Employer

State

14.b. Amount of payment.